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TOTAL NUMBER OF PAGES BEING SENT (INCLUDING COVER SHEET): 8

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DATE: April 4, 2005

TO: Examiner Michael Safavi
Group Art Unit 3673 FAX #: 1 703-872-9306

PHONE #: 1 703 308 2168

Application No.: 09/862,905
Applicant: Kasner et al.
Due Date: April 4, 2005

OUR REF.: 1915.14US03

FROM: Wm. Larry Alexander
PHONE #: (612) 349-5757

Attached please find the following for filing in the above-identified application.

- (1) Amendment in response to Office Action dated November 5, 2004;
- (2) Petition for Extension of Period for Response for Two (2) months; and
- (3) Amendment Transmittal.

Respectfully submitted,

Wm. Larry Alexander
Wm. Larry Alexander
Registration No. 37,269

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. 703-872-9306 on the date shown below.

April 4, 2005
Date

Wm. Larry Alexander
Wm. Larry Alexander

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Attorney Docket No. 1915.14US03

AMENDMBNT TRANSMITTAL

In re the application of:

Kasner et al.

Confirmation No.: 9685

Application No.: 09/862,905

Examiner: Michael Safavi

Filed: 22 May 2001

Group Art Unit: 3673

For: RIDGE CAP TYPE ROOF VENTILATOR

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are:

[X] Amendment (4 pages).

[X] Petition for Extension of Period for Response.

[] _____.

The filing fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra (Equals)	Small Entity Rate	Add'l Fee	OR	Large Entity Rate	Add'l Fee
Total	-	=	x 25	\$			x 50	\$
Indep.	-	=	x 100	\$			x 200	\$
Mult Dep.		=	+ 180	\$			+ 360	\$
			TOTAL	\$	OR	TOTAL	\$	

[] **First Presentation of Multiple Dependent Claim (MDC)**

- * If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
- **** The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Application No. 09/862,905

Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.

The Commissioner is hereby authorized to charge \$450.00 payment of any fees under 37 C.F.R. § 1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 16-0631.

Respectfully submitted,

Wm. Larry Alexander
Wm. Larry Alexander
Registration No. 37,269

Please grant any extension of time necessary for entry; charge any fee due to Deposit Account No. 16-0631.

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4 April 2005

Date

Wm. Larry Alexander
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